

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12751	Date: August 2, 2024
	Change Request 13673

SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) Front End Updates for January 2025

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide the January 2025 Combined Common Edits/Enhancements Module (CCEM) edits for the Part A and Part B Medicare Administrative Contractors and the Common Electronic Data Interchange (CEDI) contractor. Additionally, this CR directs Shared Systems to appropriately update the CCEM.

EFFECTIVE DATE: January 1, 2025

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: January 6, 2025

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One Time Notification

Attachment - One-Time Notification

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II. GENERAL INFORMATION

A. Background: The purpose of this Change Request (CR) is to provide the January 2025 Combined Common Edits/Enhancements Module (CCEM) edits for the Part A and Part B Medicare Administrative Contractors and the Common Electronic Data Interchange (CEDI) contractor. Additionally, this CR directs Shared Systems to appropriately update the CCEM.

As part of its efforts to comply with the administrative simplification provisions of HIPAA and its implementing regulations, CMS instructs its shared systems maintainers and local Medicare contractors to maintain common front-end HIPAA validation edits through a quarterly release CR. These edits pertain to the current standards adopted under HIPAA.

The CMS determines the edits, which are to be administered at the front-end and documents these edits in a spreadsheet which are attached to the quarterly CR. The spreadsheet document all the edits to date as well as those edits which are changed, deleted, or added. The spreadsheet change log directs the contractors as to those changes, they must make for the quarter. The change log worksheet tab contains only the changes made for this version.

Contractors and shared systems maintainers shall use the attached edits spreadsheet as a replacement for the previously issued edits spreadsheet. Contractors are not required to replicate work already done but are only expected to use the updates to the spreadsheet to build upon their previous core deliverables.

B. Policy: HIPAA

III. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME	Shared-System Maintainers				Other
		A	B	HHH		FIS	MCS	VMS	CWF	
13673.1	Using the attached edits spreadsheet, contractors shall be responsible for creating test data to generate the Medicare defined TA1 at the interchange level and 999 transactions at the functional group and transaction levels.								CEDI	
13673.2	Contractors shall use the attached edits spreadsheet to implement the appropriate TA1 at the interchange level.								CEDI	
13673.3	Using the attached edits spreadsheet, contractors shall generate the “Accepted” 999 at both the functional group and transaction levels back to the submitter when the front-end translator is able to create a syntactically compliant flat file.								CEDI	
13673.4	Using the attached edits spreadsheet, contractors shall generate the “Fully Rejected” 999 at the functional group and transaction levels based on the attached edits spreadsheets.								CEDI	
13673.5	Using the attached edits spreadsheet, contractors shall generate the “Accepted with Errors” 999 at the functional group and transaction levels based on the attached edits spreadsheet.								CEDI	
13673.6	Contractors shall use the attached edits spreadsheets for the implementation of their edit's software.								CEDI	

IV. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

V. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
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Section B: All other recommendations and supporting information:N/A

VI. CONTACTS

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VII. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 1